## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

6RCL 5763

|  |   | CLAIMS AS                                 | Column                    |                       |                                 |                  |            | SMALL ENTITY TYPE   |                        | OTHER THAN<br>OR SMALL ENTITY |                     |                        |
|--|---|---|---------------------------|-----------------------|---------------------------------|------------------|------------|---------------------|------------------------|-------------------------------|---------------------|------------------------|
| TOTAL CLAIMS   |   |   | 87                        |                       |                                 |                  | ſ          | RATE                | FEE                    |                               | RATE                | FEE                    |
| FOR ·  |   | NUMBER FILED                              |                           | NUMBER EXTRA          |                                 |                  | BASIC FEE  | 370.00              | OR                     | BASIC FEE                     | 740.00              |                        |
| TOTAL CHARGEABLE CLAIMS  |   |   | 87 minus 20=              |                       | * 47                            |                  |            | X\$ 9=              |                        | OR                            | X\$18=              | RUG                    |
| INDEPENDENT CLAIMS   |   |   | U minus 3 =               |                       | * 1                             |                  |            | X42=                |                        | OR                            | X84=                | 84                     |
| MU   | LTIPLE DEPENI   | DENT CLAIM PI                             | RESENT                    |                       |                                 |                  |            | +140=               |                        | OR                            | +280=               |                        |
| * If   | the difference  | in column 1 is                            | less than zero, enter "0" |                       |                                 | olumn 2          | L          | TOTAL               |                        | OR                            | TOTAL               |                        |
|  | CI  | LAIMS AS A                                | MENDED - PART II          |                       |                                 |                  |            |                     |                        |                               | OTHER THAN          |                        |
|  |   | (Column 1)<br>CLAIMS                      | ( )                       | (Colui                |                                 | (Column 3)       | ١ _        | SMALL E             |                        | OR                            | SMALL               |                        |
| AMENDMENT A  |   | REMAINING<br>AFTER<br>AMENDMENT           |                           | NUM<br>PREVIO<br>PAID | BER<br>OUSLY                    | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                     | **                    |                                 | =                |            | X\$ 9=              |                        | OR                            | X\$18=              |                        |
|  | Independent   | *   | Minus                     | ***                   | T CL AIM                        | =                |            | X42=                |                        | OR                            | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |   |                           |                       |                                 |                  |            | +140=.              |                        | OR                            | +280=               |                        |
|  |   |   |                           |                       |                                 |                  |            | TOTAL<br>ADDIT. FEE |                        | OR                            | TOTAL<br>ADDIT. FEE |                        |
|  |   | (Column 1)                                |                           | (Colu                 | mn 2)                           | (Column 3)       |            |                     |                        | -                             |                     |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                           | NUN<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                     | **                    |                                 | =                |            | X\$ 9=              |                        | OR                            | X\$18=              |                        |
|  | Independent   | *   | Minus                     | ***                   |                                 | <u> -</u>        | ┧╽         | X42=                |                        | OR                            | X84=                |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                           |                       |                                 | L                | ┧╽         | .140                |                        | ļ                             | +280=               |                        |
|  |   |   |                           |                       |                                 |                  | Į          | +140=               |                        | OR                            | TOTAL               |                        |
|  |   |   |                           |                       |                                 |                  | ,          | ADDIT. FEE          |                        | OR                            | ADDIT. FEE          |                        |
| _  |   | (Column 1)<br>CLAIMS                      |                           |                       | ımn 2)                          | (Column 3)       | <b>_</b> _ |                     |                        | _                             |                     |                        |
| AMENDMENT C  |   | REMAINING<br>AFTER<br>AMENDMENT           |                           | NUN<br>PREV           | HEST<br>MBER<br>MOUSLY<br>D FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                     | **                    |                                 | =                |            | X\$ 9=              |                        | OR                            | X\$18=              |                        |
|  | Independent   | *   | Minus                     | ***                   | IT CLAIM                        | =-               | ┨╏         | X42=                |                        | OR                            | X84=                |                        |
| <u> </u>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140   |   |                           |                       |                                 |                  |            | +140=               |                        | OR                            | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |   |   |                           |                       |                                 |                  |            |                     |                        | OR                            | TOTAL               |                        |
|  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                           |                       |                                 |                  |            |                     |                        |                               |                     |                        |